Direct Support Professional Training
Year 1

Student's
Resource Guide

California Department of Education
and the
Regional Occupational Centers and Programs
in partnership with the
Department of Developmental Services

1999

Dedication

To everyone who is committed to improving the quality of life for individuals with developmental disabilities.

Acknowledgements

These Direct Support Professional (DSP) Training materials reflect the tremendous effort by many people throughout the state of California and across the nation who contributed their time and expertise. In doing so, these individuals have demonstrated their personal commitment to promoting quality services for people with developmental disabilities. Special thanks are extended to:

- The California Legislature for their leadership in establishing this Direct Support Professional (DSP) Training Program.

- The Department of Developmental Services Advisory Committee members who have provided essential individual and collective input into the development and review of the core competencies, testing and training materials.

- The Direct Support Professionals (DSPs)/care providers for their dedication and invaluable input into the development of the core competencies.

- Individuals with developmental disabilities and their family members for sharing insightful information about their needs and what is necessary to their quality of life.

- The dedicated staff at regional centers for their faithful support to the training development process by sharing materials, ideas and concerns.

- The curriculum writers through whose collective genius and skills these materials were developed: Bill Allen, Ph.D., Ed Anamizu, PharmD., Joyce Berndt, M.A., Dema Hudson, M.A., Rhonda Krantz Mayer, M.S.S.A., Marsha Parsons, M.A., Dennis Reid, Ph.D., John Shea, Ph.D., Scott Shepard, M.A. and Barbara Ward, R.N.

- The Department of Education's Regional Occupational Centers and Programs for their extraordinary commitment to implement this testing and training program. Special thanks and acknowledgment to Ed King and local Regional Occupational Centers and Programs trainers.

- The primary Department of Developmental Services staff who are coordinating the development and implementation of the training program: Margaret Anderson, Betsy Schultz and Ben Monroe.

- In addition: Ron Huff, Ph.D., Greg Wagner, Ph.D., Lana Martin, Tom Gracia, RPh., Deb Phillips, Cheri Yohamura, Peter Searls, Linda Anderson, Donna Schwan, Deirdre Ransome, Bob Lawrence, Marian Kung, Doug Fisher, Ph.D., Michael Kluck, Att., Diane Ambrose, Richard Mesaros, Ph.D., Jacki Anderson, Ph.D., Katie Bishop, Ph.D., Tom Neary, Shauneen Zupan and many others who provided inspiration, guidance, technical materials and support throughout the project.

There are many indivdiuals whose names are not mentioned above, but who in some way or another have added to the successful completion of this training effort. To all of you, our sincerest appreciation!

Foreword

In 1998, the California Legislature established the Direct Support Professional (DSP) Training Program. The purpose of the program is to increase quality of care for people with developmental disabilities living in licensed Community Care Facilities by ensuring core competencies or skills for all Direct Support Professionals. The statewide training program requires all Direct Support Professionals to successfully complete 70-hours of training over two-years, or to pass a challenge test for each of two, 35-hour training segments. Upon successfully completing either of these requirements, Direct Support Professional Certification will be provided.

The California Department of Developmental Services formed an Advisory Committee, consisting of representatives from the developmental services community, to provide direction for the training program. This was accomplished through statewide meetings, mailings, focus groups and pilots of draft training and testing materials. A formal job analysis was conducted to identify core competencies for Direct Support Professionals. The training and testing materials were then developed from these core competencies.

The Department of Developmental Services has engaged the California Department of Education's Regional Occupational Centers and Programs to implement the training and testing program. The training program is being coordinated and taught by Regional Occupational Centers and Programs in local communities. Local Regional Occupational Centers and Programs have also established Advisory Committees to assist in meeting community needs.

The training materials include: a *Teacher's Resource Guide* with lesson plans, applicable instructor dialogue and background information, classroom activities (with teaching ideas/ tools for use with LCD or overhead projector, TV-VCR, charting activities, group and individual work), homework assignments, reference and resource materials for each of the eleven training sessions. The *Resource Guide* for the Direct Support Professional includes extensive information related to each of the eleven training sessions, in-class activities, homework assignments, session review questions/answers, reference and resource materials. Both guides have a Key-Word Dictionary encompassing all the key-words used throughout the eleven training segments, and general information to help Direct Support Professionals in preparing for the required competency test at the end of the training.

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Introduction, Overview

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Activity:
Getting to Know Each Other

Please pair up with someone, ask each other the following questions and record them here:

What is your name?

Where do you work?

What do you do?

What are three separate words that describe the <u>positive</u> ways that you feel about your job?

Information Brief
How DSPs View Their Jobs*

When asked to describe how they felt about their work, the overwhelming majority of caregivers (in a New Hampshire survey) gave positive responses. When asked to use three separate words that best describe how they feel about the work they do, participants responded:

- Rewarding (34)
- Frustrating / Stressful (25)
- Challenging (19)
- Satisfying / Enjoyable (17)
- Caring / Helpful (12)
- Positive Adjectives: creative, valuable… (59)
- Negative Adjectives: unappreciated, bored… (14)

When asked what things they most wanted to have continue, the caregivers' primary concerns were for the individuals they served. One worker summed it up this way: "I want to continue, assisting people with their independent living; giving them the chance to live the life I take for granted." Talking about changes they'd like to see in their jobs, caregivers spoke of the need to place more importance on the person's quality of life and less emphasis on meeting tasks and objectives. Those providing direct supports wanted to be acknowledged and respected for the role they play in the service system. They wanted better pay, full benefits, and

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- Excerpted and adapted from Frontline Initiative, **New Hampshire Listens & Learns from DSPs**

increased training opportunities. Caregivers wanted to be represented not only on the person's planning teams, but also included in the agency's decision-making process.

DSPs were asked what it would take to make things better in care and support in their own agencies. They identified the following four necessary changes.

- *More Respect for Individuals with Disabilities.* Suggestions included: administrators need to get a taste of the reality and issues for both individuals and staff; and individuals must be provided with as much information as possible so they can make informed decisions about what happens in their lives.

- *Include Caregivers in the Agency Decision Making Process.* Ideas included: invite caregivers to serve on agency committees; have a committee of employees meet regularly with directors and other administrators.

- *More Training Opportunities.* Requests included: more conferences and workshops for caregivers; and use the experience of caregivers in training.

- *Focus on Quality of Life.* Recommendations included: make quality of life the first priority for everyone; and learn as much as possible about the person being supported, and [develop] services that work for that individual.

Direct Support Professional
Year 1 Training Series
Listing of Class Sessions

Session	Topic	Time
1	**Introduction, Overview of Developmental Disabilities, Values, Diversity**	**2 hours**
2	Communication	3 hours
3	Wellness: Nutrition, Exercise and Safety	3 hours
4	Wellness: Medications	3 hours
5	Wellness: Responding to Individual Needs	3 hours
6	Positive Behavior Support	3 hours
7	Teaching Strategies: Relationships, Task Analysis and Prompts	3 hours
8	Teaching Strategies: Positive Feedback and Natural Times to Teach	3 hours
9	Daily Living	3 hours
10	Individual Rights, Laws and Regulations	3 hours
11	Leisure and Recreation	3 hours
12	Competency Test	3 hours
	Total Class Sessions	**12**
	Total Class Time	**35 hours**

Key Words

In this session, the key words are:

- Direct Support Professional

- Developmental Disability

- Communication

- Diversity

- Teamwork

- Values

Notes For Your In-Class Review

This is a place for you to take notes on the review questions during this session.

1. **What is a Direct Support Professional? What are the two major goals of the statewide training effort?**

2. **What is a developmental disability? What are some of the possible causes?**

3. **What is "people first" language?**

4. What are four of the six core values of services for Californians with developmental disabilities?

    What are the goals or outcomes of these values?

5. How does one appreciate diversity?

6. What is teamwork? What are some of the basics of successful teamwork?

Information Brief

Who Are Direct Support Professionals (DSP) and What is the DSP Statewide Initiative?

A Definition

The term *Direct Support Professional* (DSP) was selected by the *National Alliance for Direct Support Professionals* to describe individuals who work with people with disabilities in the places where they live and work. The DSP is also described as the person that assists individuals and their families in making choices; in leading self-directed lives; and in contributing to their communities. Finally, it is also the responsibility of the DSP to encourage attitudes and behaviors in the community that support the inclusion of individuals with developmental disabilities.

What is the Statewide Training Effort for DSPs and What Are Its Goals?

Recent legislation (1998) established a statewide, competency-based training requirement for *Direct Support Professionals.* The goal of this legislation is to improve quality of care for individuals with developmental disabilities living in licensed community settings. The Department of Developmental Services (DDS) is implementing this training in collaboration with the Department of Education,

Regional Occupational Centers and Programs. Additionally, through the provision of this training and other initiatives, DDS hopes to:

1. Increase the professional status of *Direct Support Professionals.*

2. Provide opportunities for all *Direct Support Professionals* to have quality educational experiences (for example, inservice training, continuing education) and life-long learning that supports the development of greater skills and, in turn, greater quality services for people with developmental disabilities.

3. Strengthen the working relationships and partnerships between *Direct Support Professionals*, the individuals they serve, families, regional center staff and other service providers.

4. Promote financial and career incentives for educational experiences, increased compensation, and access to career advancement for *Direct Support Professionals.*

Direct Support Professional Training Program Frequently Asked Questions (FAQs)*

1) **Who will be required to take the *Direct Support Professional* training?** Anyone working in a community care facility (CCF) licensed by the Community Care Licensing Division, Department of Social Services, and providing direct care to people with developmental disabilities who are serviced by the regional center, will be required to take the 2-year, 70-hour training or pass a competency test.

2) **Who will provide the testing and training?** Regional Occupational Centers and Programs (ROCPs) will administer the competency test and the training program.

3) **How and when will the 70-hours of training be delivered?** The required 70 hours of training will be delivered in two thirty-five (35) hour segments over two years.

4) **How long will the *Direct Support Professional* have to complete the training or pass a competency test?** Each *Direct Support Professional* employed in a CCF before January 1, 1999, must satisfactorily complete the first required 35-hour competency-based training course or pass a Department-approved competency test by March 31, 2000 and satisfactorily complete the second 35-hours of training or pass a department-approved competency test applicable to that training segment by March 31, 2001. Each *Direct Support Professional* person whose employment in a CCF facility begins on or after January 1, 1999, must satisfactorily complete the first required 35-hour competency-based training course, or pass a Department of Developmental Services approved competency test applicable to that training segment within one year of the date the staff person was hired. Those same staff must satisfactorily complete the second 35-hours of training, or pass a Department-approved competency test applicable to that training segment within two years of the date the person was hired. Satisfactory completion of each 35-hour training segment includes passing the applicable competency test.

5) **Will the *Direct Support Professional* have to take a competency test if they complete the required training?** Yes. All *Direct Support Professionals* will be required to either pass a challenge competency test for each of the 35-hour training segments in lieu of the training, or pass a competency test after completing the training to ensure that the required skills have been learned.

6) **Is there any cost to *Direct Support Professionals* for taking the required competency-based testing and training?** There is no cost to those who are required to complete the test and/or training.

• Excerpted and adapted from Department of Developmental Services (1998).

7) What is competency-based training? Competency-based training is training designed to teach skills necessary for satisfactory job performance. Training is based upon a set of competencies or job skills that have been identified through a detailed job analysis.

8) What is competency testing? Competency testing is a means to determine if an individual has skills necessary for satisfactory job performance, either as a result of experience, training, or combination thereof. The competency test for the *Direct Support Professional* training will be based upon the same set of competencies or skills as the training. There will be a separate competency test for each 35-hour segment of the training.

9) Is the training program required by law? Recent legislation (1998) requires that all existing and new *Direct Support Professionals* either pass a challenge test or take the training and pass a competency test for each of the 35-hour training segments.

10) What if the *Direct Support Professional* fails the competency test after completing the training? After completing each of the 35-hour training segments, *Direct Support Professionals* will take the competency test. Individuals who fail the test may not continue to provide direct care in a CCF, unless that individual can show good cause and the regional center approves a waiver of the requirement to pass the competency test. Conditions for a waiver are specified in regulations.

11) Will the *Direct Support Professional* receive credit or certification after passing a competency test? Individuals who either pass the challenge test or the competency test after completing the training will receive a "Certificate." The certificate will be valid throughout the state of California in Community Care Facilities for people with developmental disabilities.

To get more questions answered, and to see a copy of the regulations for the *Direct Support Professional* Training Program, go to the *California Direct Support Professional* website at **<http://www.dds.cahwnet.gov/DSPT/dsptmain.cfm>**. To learn more about national efforts on behalf of Direct Support Professionals, go to the *National Alliance for Direct Support Professionals* website at **<http://www.ici.coled.umn.edu/dsp/nadsp.html>**.
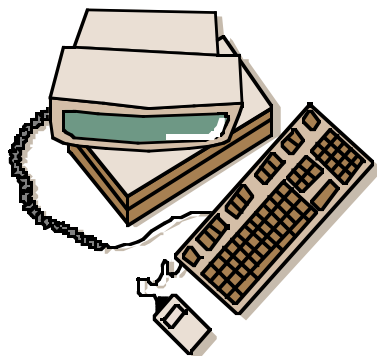
Activity:
What Are Your Goals?

What are the things your group would like to learn or learn more about during these sessions?

What are the top 3 things?

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Information Brief
Developmental Disabilities*

What is a Developmental Disability?

According to a California law called the *Lanterman Developmental Disabilities Services Act*, a developmental disability:

- begins before someone reaches 18 years of age;

- is something that goes on throughout a person's life;

- is a substantial disability for the individual; and

- often means there is a need for some kind of assistance in daily living.

Included are mental retardation, cerebral palsy, epilepsy and autism. Also included are people who need the same kinds of support as those who have mental retardation. It does not include people who have <u>only</u> physical, learning or mental health challenges.

What Causes a Developmental Disability?

A number of things can cause a developmental disability:

- **Before birth causes**
  For example, the mother has a serious illness, or has poor eating habits, poor health care, smokes, drinks alcohol or uses drugs. Developmental disabilities can also be caused by things that are inherited or by chemical or chromosome differences (like Down Syndrome).

- **During birth causes**
  For example, a lack of oxygen to the brain, low weight, or a difficult birth.

- **After birth causes**
  For example, serious accidents, abuse, lead poisoning, or poor nutrition.

Often the cause is not known. A developmental disability can happen in any family.

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* Adapted from Lanterman Regional Center Website at <**http://www.lanterman.org/**> and Kennedy Kreiger Community Resources, **The Characteristics and Needs of Individuals with Developmental Disabilities.**

Developmental Disabilities

Mental Retardation

Autism

Cerebral Palsy

Epilepsy

Other

What Are the Major Kinds of Developmental Disabilities?

The following are the major kinds of developmental disabilities:

Mental Retardation
The legal definition has to do with how an individual scores on an intelligence test and how intelligence affects a person's ability to do certain things. However, it is easier to explain that people with mental retardation are likely to:

- learn more slowly;

- have a hard time remembering things that are learned;

- have a hard time using what is learned in a new situation;

- think about things in more real-life or concrete ways; and

- keep learning and developing throughout life like all of us.

There are different levels of mental retardation from mild to moderate to severe. This means that people need different types of assistance in daily living.

Mental retardation is very different from mental illness. Some people who have mental retardation also have mental illness, but most people who have mental illness do not have mental retardation.

Cerebral Palsy

Cerebral palsy is a condition caused by damage to the brain which often happens before, during or shortly after birth. "Cerebral" refers to the brain, and "palsy" to a condition which affects physical movement. As with mental retardation, this condition can range from mild to severe. People with cerebral palsy may have:

- awkward or involuntary movements

- poor balance

- unusual walk

- poor motor coordination

- speech difficulties

Cerebral palsy is not a disease and you can't catch it. While it doesn't usually get worse, people can lead more independent lives through physical therapy and the use of special devices (for example, computers, and wheelchairs). Individuals with cerebral palsy may also have mental retardation and/or epilepsy.

Autism

Autism affects people in many different ways. The causes are not very well understood. Some people who have autism also have mental retardation. People with autism may:

- have a hard time making friends;

- get happy or upset about things that don't make sense;

- have a difficult time communicating with other people;

- hurt themselves; and

- want to stick to a certain way of doing things and get upset if things get changed around

Epilepsy

Epilepsy is a physical condition that occurs when there is a sudden, brief change in how the brain works. When brain cells are not working well, a person may become unconscious, or his/her movement, or actions may be very changed for a short time. These changes are called epileptic seizures. Epilepsy is sometimes called a seizure disorder. Individuals with epilepsy may also have mental retardation, cerebral palsy or autism.

Other

Includes people who need the same kinds of support as those who have mental retardation. It does not include people who have only physical, learning or mental health challenges. Examples are conditions like Neurofibromatosis, Tuberous Sclerosis and Prader-Willi Syndrome.

What is a Developmental Delay?

A developmental delay is a very large difference between a young child's (up to 36 months of age) abilities and what is usually expected of children of the same age. Infants and toddlers who have a developmental delay can receive *early intervention services*. These services support the child in learning the things that will help him/her start to catch up.

A Guide to Talking and Writing about People with Disabilities - People First*

In talking and writing about people with disabilities, remember *it's people first, the disability comes second.* The subtle difference between calling Joe "a person with mental retardation" rather than a mentally retarded person is one which acknowledges Joe as a person first.

AVOID:	*USE:*
victim	individual with a developmental disability
invalid	
crippled	individual with a seizure disorder
afflicted with	individual with cognitive disabilities
suffers from	a person who is non-ambulatory
DDs	individual with Down Syndrome
TMRs	individual
EMRs	person
confined to a wheelchair	participant
mongoloid	worker
the retarded	student
the handicapped	
mentally deficient	
patient	

* Adapted from **Put in a Good Word for Me**, North Los Angeles County Regional Center.

label jars . . . not people

Information Brief

Regional Centers

In California, many services for people with (or 'at risk' of) a developmental disability are coordinated through a network of twenty-one, non-profit regional centers established by the Lanterman Act. If a person is eligible, regional centers provide planning and related services, including service coordination. Service coordinators help individuals and families with information, guidance, and assistance in accessing and using appropriate generic services and natural supports.

If the service is related to the person's developmental disability and is included on the *Individual Program Plan* (the IPP is developed by an individual and his/her planning team, it states the goals that an individual is trying to achieve and the services and supports needed to reach those goals), a regional center may purchase the service from an approved service provider. Here are some *typical* services provided through a regional center:

- *Advocacy* – assisting individuals to get needed services from community and government agencies;

- *Assessment and consultation* – gathering information about individual service needs and supports;

- *Positive Behavior Support* – classes and individual consultation around positive behavior supports;

- *Early intervention programs* – for children not yet in public school; includes neighborhood preschools, and infant development programs, with involvement by parents and other specialists;

- *Independent/Supported living* – services and supports for adults to live more independently in their own homes;

- *Medical* – identifying and accessing needed health services, typically (but not always) paid for by private insurance or government health care programs (for example., county hospitals; Medi-Cal fee-for-service; EPSDT; CCS; etc.);

- *Residential* – licensed or certified residential options including long-term health care facilities, foster family homes, community care homes, and family home agencies;

- *Respite Care* – added help for the family in order to provide a break from care-giving responsibilities (may involve nursing or positive behavior support, as needed);

- *Social/Recreational* – locating a variety of social/recreational activities through various community organizations;

- *Therapy and Counseling* – referral to various therapists and public or private mental health agencies; and

- *Vocational* – assistance in accessing a variety of work-related services and supports that include job placement, job coaching, training for employment, sheltered work, and pre-vocational programs, some of which are funded by regional centers, others of which are funded through the Department of Rehabilitation.

Activity:
What's Most Important In the Job?

After you have moved into small groups, look at the following list of important qualities of employees. Now, as a group, rank them from **1** (most important) to **10** (least important) the way you see them. That means you all have to decide what is the first most important, second most important (and so on) together. Next, rank them again the way you think (as a group) your supervisor sees them. Now, in the third column, rank them again as you think the people with developmental disabilities you support see them.

Quality	Your Own	Your Supervisor	People You Support
Good appearance	_____	_____	_____
Learns from mistakes	_____	_____	_____
Honest and truthful	_____	_____	_____
Accountable for actions	_____	_____	_____
Responsible	_____	_____	_____
Customer/individual is first	_____	_____	_____
Gets things done	_____	_____	_____
Accepts change and is flexible	_____	_____	_____
Manages time well	_____	_____	_____
Positive attitude	_____	_____	_____

Information Brief

A Brief History of Developmental Disabilities Services

Three Major Changes

There have been three major changes in how citizens in general have thought about people with developmental disabilities. These views have changed the way that services for individuals and families are provided:

1. **Taken Care Of.** Up until the 1960s, citizens thought that individuals with developmental disabilities should be *taken care of* and that this could be best accomplished in an institution away from the community.

2. **Education and Training.** From the mid-1960s to the mid-1980s, citizens began to see that individuals with developmental disabilities could grow and learn through *education and training*. During these years, special schools, training programs, and group homes were developed in large numbers in communities throughout the United States.

3. **Community Members**. From the mid-1980s to the present, citizens began to see individuals with developmental disabilities as their neighbors, co-workers, friends, and fellow *community members*. Now, the focus is on providing the services that individuals and families need and want in the communities of their choice.

These major changes in the attitudes of citizens as well as in the way services are provided were largely due to: (1) the public education efforts of the families of individuals with developmental disabilities; (2) changes in the national and state laws; and (3) individuals with developmental disabilities speaking up for themselves.

In California

In California, institutions were the primary way that people with developmental disabilities were served through the mid-1960s. In fact, there was a demand for building more institutions. However, a study by the California Legislature showed that not everyone needed institutional services and that the cost of building more would be very high.

This study encouraged the Legislature to look for alternatives. In 1966, the Legislature funded two pilot regional centers. Their focus was on supporting individuals in their home communities as an alternative to living in a state institution. Those first two regional centers were so successful, the Legislature funded a total of twenty-one as well as a system of community-based services.

In 1972, the Legislature expanded the law to include people with mental retardation, cerebral palsy, epilepsy, autism, and other neurological problems under the term *developmental disability*. You will learn more about the *Lanterman Act* and other laws and regulations in another class.

Information Brief

What Are the Values of Developmental Disabilities Services in California*

Services for people with developmental disabilities in California are based on an important set of values. These values can be found in the Lanterman Developmental Disabilities Services Act (the Lanterman Act). This is the piece of legislation that helped start our current statewide system of services back in the 1970s. It begins by mentioning that a vision for the future of California is one where individuals with developmental disabilities can participate in everyday life with their friends, neighbors, and co-workers.

It also mentions that services for people with developmental disabilities are based on the values of choice, relationships, regular lifestyles, health and well-being, rights and responsibilities, and satisfaction. Below is a brief description of those values.

Here is what California law (the Lanterman Act) says about the value of **choice**:

- services and supports should be based on the individual and his/her needs and preferences;

- individuals (with help from parents, legal guardians, or conservators when needed) should take part in decisions about their own lives (like where and with whom they live, their relationships with others, the way in which they spend their time, and setting goals for the future);

· Adapted from **Looking at Life Quality**, Department of Developmental Services (1996).

- people need to have a chance to practice making decisions and choices;

- an individual's choice (or parents, conservator, or guardian where support is needed) of service providers should be honored; and

- services and supports should change based on the changing needs or preferences of an individual.

Here is what California law says about the value of **relationships**:

- people with developmental disabilities have the right to develop relationships, marry, be part of a family, and to be a parent if they choose;

- support may be needed to develop intimate relationships (like transportation, family counseling, or training in human development and sexuality);

- support may be needed to help people start and keep relationships with friends and other community members.

Here's what California law says about the value of **regular lifestyles**:

- people should have a chance to be involved in the life of their community in the same ways as their neighbors, friends and fellow community members;

- services should be provided whenever possible in the home and community settings where people live and work;

- cultural preferences should be honored;

- individuals should have the training needed to be as independent and productive as possible;

- when an individual needs change, services should be changed as well to make sure that people can stay living where they choose to live;

- people should be comfortable where they live, have privacy when they need it, and should have a say in the way their living space is decorated and arranged; and

- there should be services and supports which would allow minors with developmental disabilities to live with their families whenever possible.

Here's what California law says about the value of **health and well-being**:

- people have a right to be free from harm and to live a healthy lifestyle;

- individuals should have a chance to learn how to keep themselves safe, or have services and supports which will provide safety;

- individual's have a right to quick medical, mental, and dental care and treatment when they need it; and

- people should have a chance to learn how to keep themselves healthy, or have services and supports which will keep him/her healthy.

Here's what California law says about the value of **rights and responsibilities**:

- people with developmental disabilities have the same basic legal rights as other citizens;

- individuals with developmental disabilities have a right to treatment and habilitation, dignity, privacy, and humane care, prompt medical care and treatment, religious freedom, social interaction, physical exercise, and, to be free from harm;

- people have the right to make choices in their own lives, such as where to live, who to live with, who to have relationships with, education and employment, leisure, and, planning for the future;

- along with all of these rights are responsibilities, such as respecting the privacy of others, and being an informed voter; and

- individuals should have a chance to learn about their rights and responsibilities, and how to advocate for themselves.

Here's what California law says about the value of **satisfaction**:

- individuals should have a chance to plan goals for the future and to work towards them;

- individuals should be satisfied with the services and supports they receive and should have a chance to change them when they are not satisfied; and

- people should have a chance to have a good quality life.

Individual Life Quality Outcomes

CHOICE
1. Individuals identify their needs, wants, likes and dislikes.
2. Individuals make major life decisions.
3. Individuals make decisions regarding everyday matters.
4. Individuals have a major role in choosing the providers of their services and supports.
5. Individuals' services and supports change as wants, needs and preferences change.

RELATIONSHIPS
6. Individuals have friends and caring relationships.
7. Individuals build community supports which may include family, friends, service providers/professionals and other community members.

LIFESTYLE
8. Individuals are part of the mainstream of community life and live, work and play in integrated environments.
9. Individuals' lifestyles reflect their cultural preferences.
10. Individuals are independent and productive.
11. Individuals have stable living arrangements.
12. Individuals are comfortable where they live.
13. Children live in homes with families.

HEALTH and WELL-BEING
14. Individuals are safe.
15. Individuals have the best possible health.
16. Individuals know what to do in the event of threats to health, safety and well-being.
17. Individuals have access to needed health care.

RIGHTS
18. Individuals exercise rights and responsibilities.
19. Individuals are free from abuse, neglect and exploitation.
20. Individuals are treated with dignity and respect.
21. Individuals receive appropriate generic services and supports.
22. Individuals have advocates and/or access to advocacy services.

SATISFACTION
23. Individuals achieve personal goals.
24. Individuals are satisfied with services and supports.
25. Individuals are satisfied with their lives.

Information Brief
Diversity*

Definition of Diversity

Diversity is the important mixture of people who bring different backgrounds, styles, values, perspectives and beliefs as assets to the groups and teams with which they work.

Diversity and Work

We all have an opportunity to experience diversity in our lives every day. It may be diversity in age, ethnicity, nationality, religion, gender, ability or disability. Our openness to those experiences will determine whether we thrive in the diversity of the people we encounter or struggle with it.

It's projected that by the year 2000, the majority of individuals with developmental disabilities in California will be non-white and non-Anglo. Even if you did not know this information, it just makes good sense to be as culturally aware as possible in your work.

What is It to Appreciate Diversity?

Sensitivity is the awareness of the feelings, values and attitudes of others. To be sensitive to and *appreciate diversity*, it's important to:

- Let yourself try to experience life situations from the perspective of the individuals and families you support as well as your co-workers.

- Be aware of your own thoughts which might exaggerate and misinterpret the differences of individuals from another culture.

- Remember that, your role as a *Direct Support Professional* and team member is to support and respect the decisions of individuals and families.
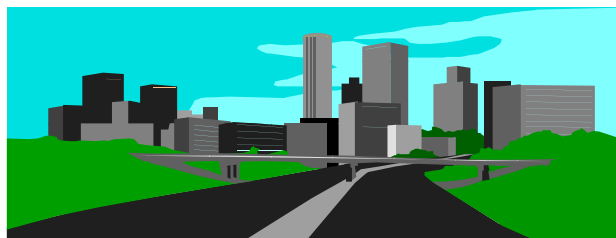
*   **Cultural Sensitivity**, prepared by Jose Hurtado, Eastern Los Angeles Regional Center (1996); **Cultural Connection: Cross Cultural Competency Training**, prepared by the Eastern Los Angeles Regional Center and the University of Southern California (1993).

Information Brief
The Platinum Rule*

A good starting point for valuing and appreciating diversity is to view everyone as different from us, and to view them as people about whom we can't make assumptions. Appearances are deceptive; people who appear to be very similar to us are often different, and those who appear to be very different can turn out to be quite similar.

The most important principle for valuing diversity is The Platinum Rule. This is an expansion of The Golden Rule. The Golden Rule is a time-honored practice that is a foundation of many religious disciplines. In telling us to "treat others as you want to be treated," its intentions are sound. It was designed to prevent us from doing harm to others – things which others obviously would not like.

With the increasing complexity of our society, we now need to extend The Golden Rule because it does not account for people's different and unique needs. We cannot assume that others want to be treated exactly the way we do. By assuming that everyone else wants what we do, we perpetuate the values and beliefs of the dominant culture. The Platinum Rule gives others permission to be different from us, and reminds us to honor that difference.

The Platinum Rule is:

Treat others as they want to be treated.

Using The Platinum Rule makes it okay for us to have differences. In the classic 1973 Harvard Business Review article, "What It's Like to Be a Black Manager," Edward Jones notes that removing the "taboo" of discussing differences is the first step toward valuing them.

The "fine line" of discussing differences is that they should be work related and behaviorally oriented. People should not feel they are being judged or labeled because of their differences.

Why do you think The Platinum Rule may be more effective for appreciating diversity than The Golden Rule? How do we find out how others want to be treated?

- **The ASTD Trainer's Sourcebook: Diversity**, by Tina Rasmussen (1996).

Activity:
Stereotypes

You will notice the four large sheets of flip-chart papers on the wall. Below each paper are several marker pens. When your facilitator gives you this activity, go to the paper on the wall closest to you and grab a marker. Start writing the stereotypes of people with developmental disabilities that you have heard from others. Make sure everyone has a chance to write down their thoughts. It doesn't matter if you write something that someone else has already written. Don't worry about spelling and grammar.

Stereotypes of People with Developmental Disabilities
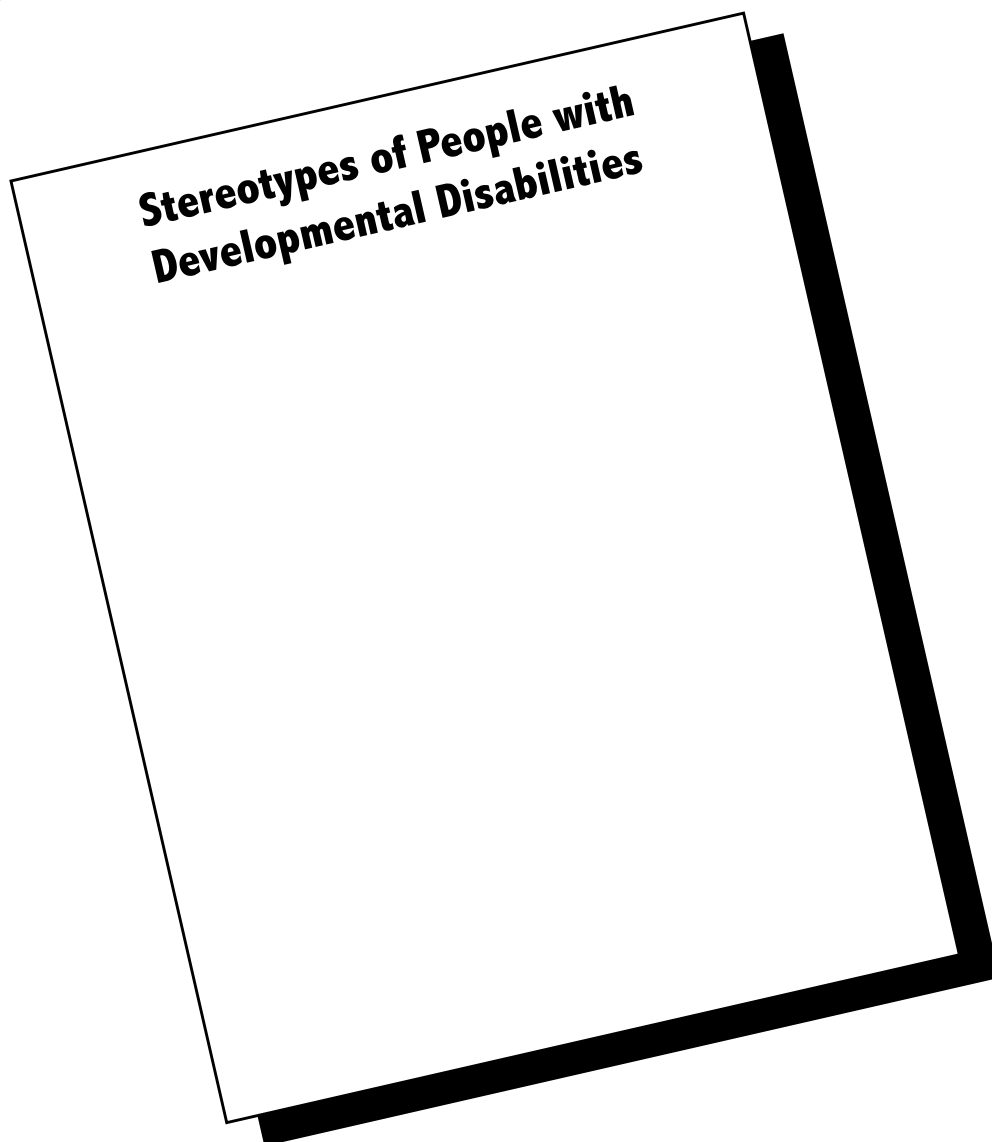
Information Brief
Diversity, Communication, and Teamwork*

Differences in Culture and Communication

There are some important differences in communication style that are influenced by culture. Here are some things to think about in communicating with individuals or families who are culturally different from you.

Eye Contact and Facial Expressions
Individuals with European cultural backgrounds (for example, English, German) usually appreciate eye contact. However, among many Asian cultures, eye contact between individuals who do not know each other is not appreciated and long periods of eye contact may be seen as not respectful.

Many individuals from European cultures show their emotions through expressions on the face (for example, lifting the eyebrow). However, individuals form Native American or Asian cultures may not communicate emotion through facial expressions unless they know someone well.

Closeness and Touching
Individuals from European cultures tend to stay a distance of about 3 feet, or an arm's length, between themselves and others during conversations. However, individuals from Latin cultures are comfortable with closer conversational distances, while those from Asian cultures often prefer more space between the speaker and listener.

Among many Asian cultures, hugging, back slapping, and handshaking are not typical and should be avoided. Among some individuals from Middle Eastern cultures, use of the left hand to touch another person is a *not okay* because the left hand is used for personal hygiene.

Many individuals from European cultures show affection for children by patting them on the head. However, this is not an acceptable form of touch among many Asians who believe that the head is the where the soul lives. Also, some East Indians believe that the head is fragile and should not be touched.

Gestures
Individuals from European cultures tend to use some gesturing while they talk as do some Latinos and Middle Easterners.

Nodding the head up and down is taken as a sign of understanding and agreement in many cultures, but among Asian, Native American, Middle

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Eastern, and Pacific Island groups, it often only means, *I hear you speaking*. It does not mean that the person understands what is being said or agrees.

Also, individuals from European cultures often ask people to come their way by pointing with the index finger palm up and curling it toward the body while people from other cultures use this gesture only when summoning animals. In those cultures, it is never used with children or adults in such cultures.

Good Communicators

Effective communication with individuals from other cultures works best when you:

• are flexible and can tolerate different points of view;

• make sincere attempts at trying to understand things from another point of view;

• are open to learning about another culture; and

• have a sense of humor.

Diversity and Teamwork

You will find diversity in the people you work with as well as the people you support. The information above about differences in culture and communication will also help you work as an effective team member. Teamwork is a key to successful service for people with

developmental disabilities. In addition to the people you work with and support, your team will likely include family members, consultants, health professionals regional center and licensing staff, as well as staff from other community services. So, it's important to know some basics about teams and how they work best.

Some Team Basics

What is "teamwork"? Teamwork is about sharing, cooperating, and helping one another. An effective team is a group of people working together with a common purpose, who value each others contributions and are working toward a common goal. Working through teams usually gets better results than a lot of individual efforts which may be working against each other.

Many experts say trust is basic to successful teamwork. Trust takes time, because it depends on people sizing up each other to see whether they say what they mean, do what they say, and contribute to the work of the team.

Besides **trust**, other values that support teamwork are:

• open, honest communication;

• equal access to information; and

• focus on the goal.

In-Class Review

1. **What is a Direct Support Professional? What are the two major goals of the statewide training effort?**

   A Direct Support Professional is an individual who works with people with disabilities in the places where they live and work.

   The two major goals of the training effort are:

   1. To increase the professional status of *Direct Support Professionals.*

   2. To provide opportunities for all *Direct Support Professionals* to have quality educational experiences (for example, inservice training, continuing education) and life-long learning that supports the development of greater skills and, in turn, greater quality services for people with developmental disabilities.

2. **What is a developmental disability? What are some of the possible causes?**

   According to a California law called the *Lanterman Act*, a developmental disability: (1) begins before someone reaches 18 years of age; (2) is something that continues throughout life; and (3) often means there is a need for some kind of assistance in daily living.

   A number of things can cause a developmental disability: (1) **Before birth** (for example, serious illness, poor eating habits, poor health care, smoking, drinking alcohol, drugs, genetic, chemical or chromosome differences); (2) **During birth** (for example, a lack of oxygen to the brain, low weight, or a difficult birth); and (3) **After birth** (for example, serious accidents, abuse, lead poisoning, or poor nutrition).

3. **What is "people first" language?**

   The person comes first and the disability second. For example, a person with a developmental disability instead of a disabled person.

4. **What are four of the six core values of services for Californians with developmental disabilities?**

Choice, relationships, regular lifestyles, health and well-being, rights and responsibilities, and satisfaction

What is the goal or outcome of these values?

To promote an opportunity for individuals with developmental disabilities to: participate in everyday life with their friends, neighbors, and co-workers; make choices, lead independent lives and contribute to the community; achieve and maintain the best possible health; and exercise their rights and responsibilities.

5. **How does one appreciate diversity?**

- Let yourself try to experience life situations from the perspective of the individuals and families you support.

- Be aware of your own thoughts which might exaggerate and misinterpret the differences of individuals from another culture.

- Remember that, your role as a *Direct Support Professional* is to support and respect the decisions of individuals and families.

6. **What is teamwork? What are some of the basics of successful team-work?**

An effective team is a group of people working together with a common purpose, who value each other's contributions and are working toward a common goal. In addition to ***trust***, other values that support teamwork are:

- open, honest communication;

- equal access to information; and

- focus on the goal.

If You Want to Read More About
Developmental Disabilities, Values, Communication, Diversity, and Teamwork

Communicate With Confidence: How to Say It Right the First Time and Every Time
by Dianna Daniels Booher (December 1994); McGraw-Hill; ISBN: 007006606X

In a book designed to be read by professionals on the go, communications *dynamo* Booher covers speaking, listening, and all the dynamics of verbal communication on the job. Each savvy tip is based on real-life problems raised by participants in Booher Consultants workshops.

Cultural Connection: Cross Cultural Competency Training
prepared by the Eastern Los Angeles Regional Center and the University of Southern California (1993)

A self-guided workbook and video which helps to teach, reinforce and integrate cross-cultural competency.

Lanterman Developmental Disabilities Services Act
distributed by the Organization of Area Boards

The full text of Division 4.5 of the Health and Welfare Statutes, including all amendments to the Act through 1997. This document is available at all local Area Boards. You may also find the complete text at the Department of Developmental Services website at <http://www.dds.cahwnet.gov/>.

The 10 Minute Guide to Teams and Teamwork
by John A. Woods (1997); Macmillan Spectrum/Alpha Books; ISBN: 0028617398

This 10 Minute Guide has a variety of 10-minute lessons on types of teams, the stages of team development, how to hold team meetings that generate consensus and cooperation, how to set up and train self-directed teams, dealing with conflict within and between teams, and how to use proven problem-solving techniques.

Where Do We Come From?
by Harbor Regional Center Orientation Manual (1998)

This section of the orientation provides a thorough chronology of events regarding the history of the developmental services system in the nation as well as California. It covers the major legislative, judicial, and social events which have influenced this evolving service system.

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Additional Resource Information
Why Do People Work*

What would you do? Try to imagine how you would fill in 24 hours a day, every day, if you didn't have to work. There you go – off to the beach in summer, the movies in winter, watch TV on rainy days, go skating, read a lot of books or magazines, sleep . . .

But would you? Where would the money come from to pay your bus fares, to go to the movies, to buy your TV or to pay for the electricity, or your skates and books?

Let's say that money grew on trees, and that no one had to worry about that *small* problem. Now you could do all those things, right?

Probably not, because if no one had to worry about earning money, then who would bother driving your bus to the beach – for that matter, who would bother building your bus, or making your movies, skates, books, etc.? Why would they have to?

What you'd probably end up doing would be spending most of your time farming your own food, looking after your cows for milk and meat, your sheep for clothing, and growing bamboo for the walls of your vacation beach hut.

Why would you need to do this? Because no one else would need to earn money, because money grows on trees, right?

Obviously, money in that sort of society doesn't really exist, and is of no value to people.

So, in our society, is MONEY the NUMBER ONE reason for working !!! ???

A lot of people might agree with this statement, but is money the main reason why so many people spend so much of their time working?

Surely work gives us other things as well as money? Go back to your farm for a second . . . and think of all the things you would have to do for yourself. What would happen if, for example, you weren't able to repair your hand-plow if it broke down?

Now, some other farmer probably discovered that they were particularly good at repairing broken down plows, and when everyone found this out, they all asked this farmer to repair theirs. Soon a thriving business had been set up - plows repaired in exchange for corn, or milk, or rugs or any other thing the repair person needed.

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*   Adapted from R. Klimes, **LearnWell Resources** (1997)

Pretty soon, other people began specializing in all sorts of things, and they didn't have to worry about doing everything for themselves, as they were able to trade their special skills for the things they wanted.

So, the main reason why "work'' exists today is since we cannot possibly do everything for ourselves, we get other people to do things for us, and pay them for their work. In order to do that, we must also do things for other people so that we can earn money.

Think of everything you do - All of it costs money. Electricity isn't free, nor is water, food, housing, clothing, etc. So, we appear to be back at the point again where money is still the MAIN REASON for working, but probably not in the way you were originally thinking about it. We have uncovered another couple of reasons why people work:

- because they are good at doing something special;

- other people need their skills, and vice versa;

- to satisfy our needs for shelter and food; and

- to provide "luxuries" to make our lifestyle more enjoyable.

You can get a lot out of working. It doesn't just have to be something "you gotta do!"

Although money might appear to be the main reason for working, it isn't always the main "thing" people get from their job. In fact, many people stay in their jobs because they get a lot of personal satisfaction from other aspects of that job.

Additional Resource Information
More About Work*

Top Ten Skills of Good Employees

Employability skills are the basic skills needed to do a job, no matter what kind of work you do. Employers rated the following as the top skills of their best employees:

1. Customer is first
2. Learns from mistakes
3. Honest and truthful
4. Positive attitude
5. Responsible
6. Gets things done
7. Accepts change and is flexible
8. Accountable for actions
9. Good appearance
10. Manages time well

The Changing World of Work

The world of work has changed a lot in recent years and will keep changing in the future. Yet many people still carry around outdated beliefs or myths about jobs and careers. The following will set the record

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• **Employability Skills for British Columbia**, The Ministry of Human Resource Development (1996) website at **http:/www.aett.gov.bc.ca/employability/** and the Calgary Educational Partnership Foundation.

straight about the changing world of work and the way it will unfold in future:

• The concept of a single occupation for life is no longer the norm.

• Most people will go through 6 - 10 changes of occupation during their lifetimes.

• Individuals, on average, change jobs every 3 years.

• The average person changes occupation every 5 years.

Jobs are changing also:

• more people are working part-time, part of the year;

• more workers are making a living through a combination of different types of work;

• the services industry is growing and keeping customers happy is becoming more and more important;

• there will be fewer opportunities for workers with lower education and skills; and

• there will be a greater emphasis on trades and technology.

More training will be required:

• by the year 2000, 50% of the jobs will require some education after high school; and

• 64% of the jobs will require high school graduation.

Additional Resource Information

Important Questions that Promote Quality of Life

As you go about your work in supporting people with developmental disabilities and promoting life quality, ask yourself these simple questions every day:

- **Participation**
  Are there opportunities for participation (even if only partially) in a variety of community and social activities?

- **Friendship**
  How many friends does the person have? Are there lots of opportunities to interact with and meet people (including people without disabilities who are not staff)?

- **Relationships**
  What opportunities do people have to be "givers" in a relationship? How are people recognized for their individual gifts and talents?

- **Interdependence**
  How are we supporting people to get connected within their communities? What types of natural supports exist in people's lives?

- **Independence**
  What skills are people learning and are they able to have personal privacy; especially at home?

- **Meaningful activities**
  Are people provided with purposeful activities in meaningful (real) situations?   We shouldn't be asking people to do "busy work" that has no real reason or purpose.

- **Motivation**
  Are the activities people engage in motivating and interesting to them? Are we "catching" people when they are good?

- **Choice**
  How much choice do people have throughout their lives?

- **Respect**
  How are people's routines and choices respected? How well do we listen to the people we support?

Mesaros & Shepard, revised 1999
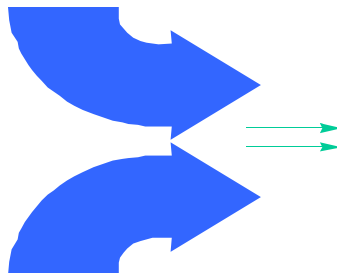
Additional Resource Information

Core Competencies for Direct Support Professionals

VALUES AND SELF-DETERMINATION
- The DSP demonstrates professional workplace behavior.
- The DSP demonstrates respect for the individual.
- The DSP demonstrates support for individual choice-making.
- The DSP demonstrates strategies to encourage and develop individual confidence.

COMMUNICATION
- The DSP demonstrates knowledge of various means of effective communication.
- The DSP demonstrates effective communication skills.
- The DSP demonstrates the ability to modify his/her communication to ensure understanding.
- The DSP encourages and supports problem solving and coping skills.

POSITIVE BEHAVIOR SUPPORT
- The DSP uses assessment strategies to evaluate how past, present and future events and environmental factors affect behavior.
- The DSP demonstrates effective methods to teach positive replacement behaviors and support existing positive behaviors.
- The DSP demonstrates ability to work as part of a team in implementing positive behavior support strategies.

TEACHING STRATEGIES
- The DSP demonstrates the ability to identify the steps required to complete a task or activity.
- The DSP applies least-to-most assistance and/or prompts.
- The DSP demonstrates the use of positive feedback.
- The DSP demonstrates the ability to follow a plan for successful teaching.
- The DSP demonstrates the ability to do individualized teaching.
- The DSP demonstrates the ability to assess and teach individual choice-making skills.
- The DSP assesses the effectiveness of teaching.

INDIVIDUAL RIGHTS, LAWS AND REGULATIONS
- The DSP demonstrates a basic understanding of the statutory and regulatory structure of services for people with developmental disabilities.
- The DSP understands and supports individual rights and responsibilities.
- The DSP demonstrates correct procedures for mandated reporting requirements.
- The DSP demonstrates knowledge of community resources to assist and educate individuals in securing needed services and supports.

WELLNESS
- The DSP demonstrates correct use of Standard Precautions.
- The DSP has knowledge of medications.
- The DSP demonstrates healthful meal planning and food preparation, storage and handling procedures.
- The DSP utilizes strategies to ensure safety, and to prevent injuries and accidents.
- The DSP responds in a timely manner to medical emergencies.
- The DSP responds to environmental emergencies.
- The DSP demonstrates knowledge and understanding of an individual's medical, mental and dental health care needs.
- The DSP recognizes and respond to signs and symptoms of illness and/or injury.
- The DSP maintains documentation of individual health status and medical needs.
- The DSP accesses community health care resources.

GOAL ATTAINMENT AND DOCUMENTATION
- The DSP demonstrates ability to participate in the process of individual goal development.
- The DSP demonstrates knowledge of documentation requirements for individual goal attainment.

DAILY LIVING
- The DSP recognizes and supports the individual's daily routine.
- The DSP supports individuals in establishing and maintaining relationships with family and friends.

LEISURE AND RECREATION
- The DSP promotes community participation.
- The DSP researches, develops and maintains information on community and other resources that meet individual needs.

Homework Assignment #1:
Your Team

As a *Direct Support Professional*, you are a member of a team at the home where you work. Read through this assignment and think about it while you work for the next few days. Then answer the following questions or complete the assignment with your co-workers.

1. Members and Roles. Who is on your team? Your co-workers, supervisor, the people you work with, family members, regional center staff, licensing workers? Who else? What are their roles (for example, *helps with planning activities, parent, does the paperwork, supervisor, service coordinator*)?

Member	**Role**
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

2. Goal. Based on what you see and the work that you do, what is the goal of your team?

3. Working together. How does your team work well together and what could it do better?

4. Accomplishments. What does the team accomplish?

5. How does it feel to be member of this team?

Homework Assignment #2
for Session #2:
Communication with Pictures

Sometimes it is helpful for people to have a way to let someone know what's on their mind that they can carry with them. Some people might use a board that has letters on it, like a computer keyboard. They can point to the letters that spell words so someone can understand them. Some people have electronic systems that use pictures or symbols, or attach to computer monitors. Some systems have a voice that repeats the word or sign or symbol that the person points to. Some people use pocket sized cards that can be stapled together so the person can use them when they are out.

Many communication books, boards and cards can be bought. You can make your own communication board or cards by using magazines, photographs, or using hand made drawings.

Your homework is to gather some pictures that will tell others in the class about you and the things you like to do. You will be communicating about a page of information if it were written. Your pictures can be photographs or pictures from magazines. Some material will be available in class, but you will want to bring the most important pictures to class with you.